PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10/501334

(Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS				11					RATE	FEE	, Un <b>1</b>	RATE	FEE	
FOR			N	NUMBER FILED		NUMB	BER EXTRA		BASIC FEE	<del></del>	OR	BASIC FEE		
TC	TOTAL CHARGEABLE CLAIMS			// minus 20=		*			X\$ 9=	Ψο		X\$18=	Ψ. σ.	
INI	INDEPENDENT CLAIMS			minus 3 =		* /	1			ļ	OR			
MI	JLTIPLE DEPEN	RESI			L	<del>'</del>		X42=	<u> </u>	OR	X84=			
*	the difference	s in column 1 is	اموو	*han 76	onter	"O" in c	-11	'	+140=		OR	+280=		
••	•			less than zero, enter "0			;olumn ∠		TOTAL		OR	TOTAL		
	C	CAIMS AS A (Column 1)	ίMΕ	NDED	PAR' - C Colun)				SMALL	ENTITY	OR	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT			HIGH NUME PREVIC	IEST BER OUSLY	PRESENT EXTRA	·	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minu	us:	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minu		***		=		X42=		OR	X84=		
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
								1	TOTAL		OΒ	TOTAL		
	de Victoria en	(Column 1)		4.54	(Colun	nn 2)	(Column 3)	25	ADDIT FEE			ADDIT. FEE		
8		CLAIMS REMAINING			HIGHI NUME	IEST BER	PRESENT			ADDI-			ADDI-	
AMENDMENT		AFTER AMENDMENT		MENS S	PREVIO		EXTRA 4	多灣	RATE:	TIONAL FEE		RATE	TIONAL FEE	
S	Total		Minu	niktalik - 93					X\$ 9≟		ОR	X\$18=		
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			是3000 1000年 1000年	110 P. 10	EIND STA				+140≘:		OR	:(+280 <u>=</u>		
								L	TOTAL DDIT FEE	SEAMAS PERMEN	OB	TOTAL		
		(Column 1)			Colum) ج	nn 2)	(Column 3).					ADDIT FEEL		
ပ		CLAIMS : REMAINING			HIGHE	EST 7/ BER	PRESENT			ADDI-			ADDI-	
AEN.		AFTER AMENDMENT			PREVIO PAID F		EXTRA	2,200	RATE	TIONAL		RATE	TIONAL FEE	
AMENDMENTC	Total		Minu	3.4.4	XV I I I I				X\$ 9≒		OR.	X\$18≡		
AME	Indépendent		Minu	A CONTRACT OF	***				X42= <sup>↑</sup>	4500 5 7 7 7	ÓЯ:	. <b>X</b> 84⊨		
38 S	FIRST PRESE			New York										
1867 N	i If the entry in column 1 is less than the entry in column 2, write "0" in column 3 If the "Highest Number Previously Paid For 'IN THIS SPACE is less than 20 enter 20.								+140≝;; TOTAL		OR:	#280≘ **TOTAL		
***	lf the "Highest Nun	mber Previously Pai mber Previously Pai ber Previously Paid	id For	"IN THIS	S SPACE is	less than	1 3. enter: "3."	11 19	DDIT. FEE	ropriate box		DDIT FEE	of the last	